

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 10
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full)

MIKE GRAVEL FOR PRESIDENT 2008

ADDRESS (number and street)

1600 N OAK ST #1412

☐ Check if different than previously reported

2. IDENTIFICATION NUMBER

C00423202

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

3. IS THIS REPORT FOR :

☐ Primary☐ General4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)☐ April 15 Quarterly Report☐ July 15 Quarterly Report☒ October 15 Quarterly Report☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20☐ March 20☐ April 20☐ May 20☐ June 20☐ July 20☐ August 20☐ September 20☐ October 20☐ November 20☐ December 20☐ January 31☐ Twelfth day report preceding

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

on _____

IS THIS REPORT AN AMENDMENT

☐ YES☒ NO

5. COVERING PERIOD

FROM

07/01/2009

THROUGH

09/30/2009

SUMMARY

6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD

5638.05

7. TOTAL RECEIPTS THIS PERIOD
(From Line 22, Column A, Page 2)

252.35

8. SUBTOTAL
(Lines 6 and 7)

5890.40

9. TOTAL DISBURSEMENTS THIS PERIOD
(From Line 30, Column A, Page 2)

0.00

10. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(Subtract Line 9 from 8)

5890.40

11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE
(Itemize All on Schedule C-P or Schedule D-P)

682.26

12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE
(Itemize All on Schedule C-P or Schedule D-P)

9528.20

13. EXPENDITURES SUBJECT TO LIMITATION

166368.25

NET ELECTION CYCLE-
TO-DATE
CONTRIBUTIONS AND
EXPENDITURES14. NET CONTRIBUTIONS (Other than Loans)
(Subtract Line 28d, Column B from 17e, Column B, Page 2)

0.00

15. NET OPERATING EXPENDITURES
(Subtract Line 20a, Column B from 23, Column B, Page 2)

166368.25

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer

MIKE GRAVEL

Date

10/16/2009

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463Toll Free 800-424-9530
Local 202-694-1100FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

MIKE GRAVEL FOR PRESIDENT 2008

Report Covering the Period

From: 07/01/2009

To: 09/30/2009

I. RECEIPTS		COLUMN A	COLUMN B
		Total This Period	Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	215966.74
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	0.00
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		0.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate		0.00	0.00
(b) Other Loans		0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating		0.00	0.00
(b) Fundraising		0.00	0.00
(c) Legal and Accounting		0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)		252.35	252.35
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		252.35	216219.09
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES		0.00	166368.25
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00
25. FUNDRAISING DISBURSEMENTS		0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	44615.73
(b) Other Repayments		0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		0.00	44615.73
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		0.00	0.00
29. OTHER DISBURSEMENTS		0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		0.00	210983.98
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)		0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full)**MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

2. IDENTIFICATION NUMBER

C00423202

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 10

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

POWERPAY

Mailing Address

280 FORE ST

City

PORTLAND

State

ME

Zip Code

04101

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

252.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	0	9

Amount of Each Receipt this Period

252.35

debt paid

Transaction ID: SA21.20767

SUBTOTAL of Receipts This Page (optional)

252.35

TOTAL This Period (last page this line number only)

252.35

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)

<input checked="checked" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal Inc

Nature of Debt (Purpose):
BALANCE IN PAYPAL NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

24.74

Transaction ID: SD11.20545

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal Inc

Nature of Debt (Purpose):
PAYPAL DONATIONS NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

151.37

Transaction ID: SD11.20546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

151.37

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal Inc

Nature of Debt (Purpose):
PAYPAL DONATIONS NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

506.15

Transaction ID: SD11.20547

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.15

1) **SUBTOTALS** This Period This Page (optional).....

682.26

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 6 / 10

FOR LINE NUMBER:
(check only one)

<input checked="checked" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
POWERPAY

Nature of Debt (Purpose):
CR CARD DONATIONS HELD
BY CC MERCHANT

Mailing Address 280 FORE ST

City	State	ZIP Code
PORTLAND	ME	04101

Outstanding Balance Beginning This Period

252.35

Transaction ID: SD11.20592

Amount Incurred This Period

0.00

Payment This Period

252.35

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

2) **TOTALS** This Period (last page this line number only)..... ▶

682.26

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

682.26

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 7 / 10

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):
CONSULTING FOR LEGAL SERV-
ICES - MAR 09

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

344.00

Transaction ID: SD12.20743

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

344.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):
LEGAL FEES JULY 2009

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20768

Amount Incurred This Period

5634.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

5634.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20649

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

6228.20

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 8 / 10

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20650

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20651

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20652

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

750.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 / 10

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVEL

Nature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20653

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVEL

Nature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20654

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONAL

Nature of Debt (Purpose):
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20769

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional).....

1500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 / 10

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20770

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20771

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JOE LAURIANature of Debt (Purpose):
CONSULTING FEES NATL PUBL-
ICITY DIRECTORMailing Address 205 PINEHURST AVE
#6JCity State ZIP Code
NEW YORK NY 10033

Outstanding Balance Beginning This Period

50.00

Transaction ID: SD12.20430

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

1) **SUBTOTALS** This Period This Page (optional).....

1050.00

2) **TOTALS** This Period (last page this line number only).....

9528.20

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

9528.20